APPLICATION FOR MUNICIPAL SETTING DESIGNATION



Applicant:			
Las	t	First	Middle Initial
Address:			
Street		City, State	Zip Code
Daytime teleph	one number:		
Email address of	of contact person:_		
Licensed Profes	ssional who prepare	ed the application:	
Last		First	Middle Initial
Address:			
Street		City, State	Zip Code
Daytime teleph	one number:		
Email address of	of Licensed Profess	ional:	
Type of License	e Held, and Date of	Expiration:	
7.1		•	
Location and le	gal description of p	proposed outer boundaries	of the MSD area:
Applicant Checklist			
(Initial each)	PLEASE PROV	IDE SIX COPIES OF T	HE FOLLOWING:
	_		
	Statement as to whether a public drinking water supply system exists that satisfies the requirements of Texas Health and Safety Code Chapter 341 and that supplies, or is		
	capable of supplying, drinking water to the area for which the MSD is sought, to include property within one-half mile of the proposed MSD.		
	Description of t	he groundwater to be res	stricted, including the identified chemicals of
	concern therein and the levels of contamination known to the applicant, and the identified vertical and horizontal extent of the contamination. If the application has not		
	documented growthe application sl	undwater contamination o hall include a statement as	offsite that originates from the proposed MSD, to whether contamination more likely than not ite and the basis for that statement.
	Identification of known.	the person(s) responsible	e for the contamination of the groundwater, if
	A listing of:		

- a. All state registered private water wells within five (5) miles from the boundary of the area for which the designation is sought, including a notation of those wells that are used for potable water purposes (if known), and a statement as to whether the application has provided the owners with notice as provided in Texas Health and Safety Code Section 361.805.
- b. Each retail public utility, as that term is defined in the Texas Water Code, that owns or operates a groundwater supply well located not more than five (5) miles from the proposed MSD, and a statement as to whether the applicant has provided the retail public utilities with notice as provided in Texas Health and Safety Code Section 361.805.
- c. Each municipality, other than the City of Arlington, with a boundary located not more than one-half (1/2) mile from the area for which the MSD is sought; or that owns or operates a groundwater supply well located not more than five (5) miles from the area for which the MSD is sought; and a statement as to whether the application has provided the municipalities with notice as provided in Texas Health and Safety Code Section 361.805.

 A site map, drawn to scale, including a metes and bounds description of the proposed MSD area, the boundary of the proposed MSD area, the location of groundwater on the proposed MSD area, and the extent of groundwater contamination to the limits that it has been defined. The map shall include a statement by a professional land surveyor registered by the Texas Board of Professional Surveying attesting to the accuracy of the metes and bounds description.
 Drawing where plume is in relation to property lines.
 Any other information that the Director deems pertinent.

An application shall be accompanied by:

- a. A set of printed mailing labels with the names and addresses of persons listed in Subsection (B) (7) of the Ordinance.
- b. An electronic file of the names and addresses of persons listed in Subsection (B) (7) of the Ordinance, in a format acceptable to the Director and compatible with City information systems.
- c. A nonrefundable application fee of \$1,000 and actual Tarrant County recording fees.

An applicant may withdraw its application only in writing by letter sent certified mail, return receipt requested, to the Director, and shall forfeit the application fee. If the Director has not issued public notice prior to the receipt of the withdrawal letter, the applicant may reapply at any time. If public notice has issued, a new application is subject to the limitations of Section 11.09 of the Ordinance.

The application shall be signed by an authorized representative of the applicant and shall contain the following certification statement:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in a manner designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Applicant	Applicant (Printed Name)
Date	
	nise Robison, Environmental Services Dept., 201 E. Abram n, TX 76010, robisond@ci.arlington.tx.us , 817-459-6148.
THE STATE OF TEXAS § COUNTY OF TARRANT §	CITY OF ARLINGTON ACKNOWLEDGMENT
	y, a notary public in and for the State of Texas, on this day
personally appeared	, known to me to be the person
whose name is subscribed to the foregoing in	strument, and acknowledged to me that he/she executed same
for the purposes and consideration therein exp	pressed and in the capacity therein stated.
Given under my hand and seal of off	fice on this theday of,
2006.	
	Notary Public In and For The State of Texas
Ī	Notary's Printed Name
My Commission Expires:	